

WILDFLOWERS PRESCHOOL PROGRAM REGISTRATION FORM 2010-2011

Child's name: _____ Gender: F M

Age in August 2010: _____ Birthdate: _____

Days of week enrolling for 9-1: Mon Tues Wed Thurs
Add afternoon 1-3: Mon Wed

Agreed upon annual tuition: _____ payable by August 10 (save 6%)

OR payable in 10 installments: _____ / month Aug.-May
(1 installment due as deposit with this form is applied to May installment)

Carpool plan: With 1 other family With 2 other families Bike/walk Don't plan on carpooling
 Custom (talk to me)
 Is it OK to put your contact info on roster to give to families to contact you about carpooling?

We might consider offering more afterschool care on-site, and encourage a local program to offer "camps" during our breaks, IF there's enough interest. If you will need this care, please mark below:

Mon Tues Wed Thur Breaks Don't know

1. Parent/Guardian Name: _____ Email Address: _____

Relationship (mother, father, stepmother, guardian, etc.) _____

Address: _____

Mailing Address: _____

Phone: (home) _____ work: _____ cell: _____

Occupation: _____ Employer: _____

Place of Employment: _____

Street Address

City

Zip

2. Parent/Guardian Name: _____ Email Address: _____

Relationship (mother, father, stepmother, guardian, etc.) _____

Address: _____

Phone: (home) _____ work: _____ cell: _____

Occupation: _____ Employer: _____

Place of Employment: _____

Street Address

City

Zip

3. Parent/Guardian Name: _____ Email Address: _____

Relationship (mother, father, stepmother, guardian, etc.) _____

Address: _____

Phone: (home) _____ work: _____ cell: _____